

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 32281
Name: GMX RESOURCES INC.
Address: 9400 N. Broadway, Suite 600
City/State/Zip: Oklahoma City, OK 73114
Purchaser: _____
Operator Contact Person: Jon Stromberg
Phone: (405) 600-0711 ext. 12
Contractor Name: Hembree Well Service
License: 32066
Wellsite Geologist: na

Designate Type of Completion:
____ New Well ____ Re-Entry Workover
____ Oil ____ SWD ____ SIOW ____ Temp. Abd.
 Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:

Operator: The Texas Company
Well Name: F. J. Loomis Gas Unit #1

Original Comp. Date: 11/12/57 Original Total Depth: 2598'
____ Deepening ____ Re-perf. ____ Conv. to Enhr./SWD
____ Plug Back ____ Plug Back Total Depth
 knocked out bridge plug
returned to Krider formation
____ Other (SWD or Enhr.?) Docket No. _____

<u>6-9-00</u>	<u>6-14-00</u>
Spud Date or Recompletion Date	Completion Date or Recompletion Date

API No. 15 - 055-00193-0001
County: Finney
____ C ____ W/2 ____ Sec. 30 Twp. 21 S. R. 33 East West
2040 feet from S / (circle one) Line of Section
1320 feet from E / (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: F. J. Loomis Well #: 1

Field Name: Hugoton

Producing Formation: Chase

Elevation: Ground: 2903' Kelly Bushing: 2908'

Total Depth: 2598' Plug Back Total Depth: 2564'

Amount of Surface Pipe Set and Cemented at 8 5/8" @ 527 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan Re-work, 9-13-00
(Data must be collected from the Reserve Pit) UC.

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Docket No.: _____

RECEIVED
STATE CORPORATION COMMISSION
WICHITA, KANSAS
JUL 24 2000

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Jon Stromberg
Title: P. E. Date: 7/19/00

Subscribed and sworn to before me this 19th day of July

Notary Public: Mary Alice Gleason
Date Commission Expires: December 15, 2000

KCC Office Use ONLY

____ Letter of Confidentiality Attached
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

X

Operator Name: GMX RESOURCES INC. Lease Name: F. J. Loomis Well #: 1
 Sec. 30 Twp. 21 S. R. 33 East West County: Finney

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken Yes No
(Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy)

List All E. Logs Run:

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

CASING RECORD New Used

Report all strings set-conductor, surface, intermediate, production, etc.

Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacs Used	Type and Percent Additives
Surface		8 5/8"	24#	527'	pozmix	350 sx	3% HA-5
Production		5 1/2"	14#	2588'	pozmix	570 sx	200 gal cealment

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
	2540-60'	500 gal 15% FE w/20% methanol &	
open hole	2588-98'	750 gal FE w/20% methanol	

TUBING RECORD	Size 2 3/8"	Set At 2594'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. 6/15/00	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls. 0	Gas Mcf 23	Water Bbls. -	Gas-Oil Ratio -	Gravity -
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Disposition of Gas Vented Sold Used on Lease *(If vented, Sumit ACO-18.)* METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____ Production Interval _____